

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NW	71534	04-15-99
O.I.P.E. CLASSIFIER		10	4-19-99
FORMALITY REVIEW		61001	4/22

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	1-11-01
2	✓	✓	6-20-01
3	✓	✓	12-4-01
4	✓	✓	5-23-02
5	✓	✓	11-20-02
6	✓	✓	3-24-03
7	✓	✓	9-11-03
8	✓	✓	3-8-04
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
14	✓	✓	
15	✓	✓	
16	✓	✓	
17	✓	✓	
18	✓	✓	
19	✓	✓	
20	✓	✓	
21	✓	✓	
22	✓	✓	
23	✓	✓	
24	N	N	
25	N	N	
26	N	N	
27	N	N	
28	N	N	
29	N	N	
30	N	N	
31	N	N	
32	N	N	
33	N	N	
34	N	N	
35	N	N	
36	N	N	
37	N	N	
38	N	N	
39	N	N	
40	✓	✓	
41	✓	✓	
42	✓	✓	
43	✓	✓	
44	✓	✓	
45	✓	✓	
46	✓	✓	
47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	1-11-01
52	✓	✓	6-20-01
53	✓	✓	12-4-01
54	✓	✓	5-23-02
55	✓	✓	11-20-02
56	✓	✓	3-24-03
57	✓	✓	9-11-03
58	✓	✓	3-8-04
59	✓	✓	
60	✓	✓	
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100	✓	✓	

Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions
 staple additional sheet here

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